

TO: City Council

FROM: Rosemarie Ives, Mayor

DATE: September 6, 2006

SUBJECT: Approval of King County Emergency Medical Services Basic Life Support Service Contract for the Year 2006

I. RECOMMENDED ACTION

By motion, approve the King County Emergency Medical Services "Basic Life Support Service Contract for the Year 2006" and authorize the Mayor to sign the contract.

II. DEPARTMENT CONTACT PERSON

Tim Fuller, Fire Chief – Ext 2202
Loren Charlston, Deputy Chief – Ext 2205
Deb Ayrs, Deputy Chief – Ext 2203

III. DESCRIPTION

Annually the Seattle-King County Department of Public Health/Emergency Medical Services Division enters into a contractual relationship with cities and fire districts for the provision of basic life support services to the citizens of King County. The contract for the period of January 1 through December 31, 2006 will provide revenues to the City of Redmond in the amount of \$539,880. While the revenues received for these services are not full cost recovery for the fire department services provided, the amount is critical to our overall fiscal stability.

From a risk management perspective, the contract provides a layer of protection for the City of Redmond in that our personnel must be trained and certified by King County Emergency Medical Services. King County manages the training and education program and program quality assurance oversight. Redmond's participation in this contract also assures that the training of city personnel is consistent with that of neighboring jurisdictions.

IV. IMPACT

A. Service Delivery

Approximately 70 percent of the department's call volume is categorized as emergency medical services related. It has become a community expectation that fire departments provide rapid, effective, and efficient response to emergency medical incidents. Redmond Fire Department employs approximately 96 emergency medical technicians and provides response services from six strategically located stations within the City of Redmond and King County Fire District 34.

B. Fiscal

Revenue to the City of Redmond \$539,880.

V. ALTERNATIVE

Do not approve the contract.

VI. TIME CONSTRAINTS

None

VII. LIST OF ATTACHMENTS

1. King County Emergency Medical Services Basic Life Support Service Contract for the Year 2006

/s/ Tim Fuller, Fire Chief

Date: 08/16/2005

Approved for Council Agenda:

/s/ Jane Christenson for Rosemarie Ives, Mayor

Date: 08/18/2005

KING COUNTY EMERGENCY MEDICAL SERVICES

Basic Life Support Standards

Agencies shall comply with the following standards in order to be eligible for basic life support services funding from King County. Failure to comply with the standards adopted by King County pursuant to Chapter 2.26 of the King County Code or by the County Medical Program Director pursuant to Chapter 18.73 RCW, shall be sufficient grounds for notification, remediation, and possible termination of funding.

Review and modifications of BLS standards may be conducted on an annual basis. Proposed changes will be submitted to the Emergency Medical Services Advisory Committee and local provider agencies for advisory comment prior to implementation.

- I. **Personnel:** All emergency medical services personnel supported directly by King County funds must be certified as Emergency Medical Technicians as defined by RCW 18.73. Basic EMT training standards have been established by King County Emergency Medical Services.
- II. **Continuing Medical Education:** EMTs will remain certified as required by WAC 246-976. Continuing Education and proficiency standards will be set by King County Emergency Medical Services and the Medical Program Director. Agencies must report completion of education and skill proficiency updates to King County Emergency Medical Services in an agree upon summary format.
- III. **Medical Standards:** Each agency providing emergency medical services shall adhere to standards of medical care for the triage, treatment and transport of patient as authorized by the Medical Program Director pursuant to RCW 18.73 and 18.71, and Chapter 2.26 of the King County Code. Standards of medical care are delineated in the King County EMS training curriculum approved by the Washington State Department of Health, "Patient Care Guidelines for Basic Life Support", and in the 1996, 1997, 1998, 1999, and 2000 Competency Based Training (CBT) modules. Additional CBT modules will continue to be issued annually. CBT modules may also be offered by the EMS Division electronically via Internet access.
 - a. **Scope of Practice:** Evaluation and treatment activities by EMTs from provider agencies not described in the standards of medical care are deemed outside the scope of practice. Changes or additions to this scope of practice will be issued periodically by the Medical Program Director.
 - b. **Record Keeping and Record Submission:** The Medical Incident Report Form (MIRF) must be completed as soon as possible following an incident. These reports should then be submitted to King County Emergency Medical Services, either electronically or by mail, within 30 days from the date the incident occurred. Agencies will be responsible for retention of copies of the reports.

- c. **Transportation Policy:** Each provider will be responsible for developing a policy for the transport of patients from the incident scene to the treatment scene. Such policy should provide for transportation based upon determinants of transport need, including medical necessity, mitigating circumstances, and provider budget.

The decision to transport a patient seen by BLS personnel will be determined by the patient's medical condition as described in the Basic EMT core curriculum and any mitigating circumstances. The mode of transport will be consistent with the patient's medical condition and provide humane, efficient and expedient care. Transport destinations should be consistent with the State Trauma System Activation Guidelines.

- d. **King County Medical Quality Assurance/Quality Improvement Programs:** Each BLS provider will agree to participate in a King County Medical Quality Assurance/Quality Improvement program. This program will be developed by King County EMS Division, with the assistance of the EMS Advisory Committee and BLS providers. Elements of this program include: 1) run review by clerical and provider personnel to ensure completeness, 2) run review by a reviewer (local paramedic or personnel from within the organization for medical appropriateness and compliance with King County Emergency Medical Services standards, 3) case follow up and discussion conducted by the run review personnel, and 4) paramedic involvement in CBT Training.
- e. **Patient Confidentiality:** Information concerning the evaluation and treatment of a patient by BLS personnel in the performance of their duties is to be handled as confidential material, including patient name, medical history, incident location, or any other confidential information. Confidential medical information may not be released unless the patient or his/her court-appointed representative completes and signs an Authorization for Release of Information form.

IV. **Equipment**

- a. All vehicles used to deliver emergency medical services must meet vehicle standards as established by the Washington State Department of Health pursuant to RCW 18.73, unless waived by the State Department of Health Office of EMS Trauma Prevention Licensing.
- b. Medical equipment used by personnel supported funds must meet appropriate federal or state standards or county protocols.

V. **Mutual Aid Agreements:** Each public agency providing basic life support services shall have written mutual aid agreement or similar arrangements in effect.

VI. **Proposed Research and Evaluation Activities:** Any proposed clinical research or evaluation activities involving personnel, equipment or data supported directly or indirectly by King County funds must receive prior review and written approval by the Medical Program Director and the King County Emergency Medical Services Division Manager and must be in compliance with State, County and local regulations and laws.

- VII. **Performance Indicators and Oversight:** In accordance with findings of the EMS Financial Planning Task Force, the EMS Division – with the assistance of the EMS Advisory Committee and the Financial Staff Team – shall develop mechanisms for improved performance oversight by the EMS system and elected officials. Performance indicators will be established and reviewed by King County EMS and reported by the EMS Division to each BLS agency and in public presentations. Mitigation activities will be initiated with local providers if needed.

Reports will be distributed to provider agencies on a regular basis. Standards for each provider will be monitored in the following major areas: total call volume, average response time for code red calls, percent of response times greater than or equal to 4, 6, 8, and 10 minutes, out-of-service times, number of transports and mode of transport. Additional performance indicators may be added, with the assistance of the EMS Advisory Committee and the Financial Staff Team.

- VIII. **Financial Indicators and Oversight:** In accordance with findings of the EMS Financial Planning Task Force, indicators shall be developed which improve financial oversight by the EMS system and elected officials. The EMS Division, in conjunction with the EMS Advisory Committee and the Financial Staff Team, shall develop reporting financial reporting measures that will include, but may not be limited to:

- a. Selection, development, and tracking of system costs.
- b. A standard costing system for reporting dollar expenditures for BLS activities.
- c. Funding allocation mechanism.